FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	(See instructions)	0/5,, , , , , , , , ,
NAME OF COMMITTEE (in	full) (Check if name Example: If typying, type over the lines	Office use only 12FE4M5
ConAgra Food	ds Inc. Good Government Association	
ADDRESS (number and	Street) One ConAgra Drive	
(Check if address is changed)	s <u> </u>	
	Omaha	NE 68102 5001
	CITY▲	STATE▲ ZIP CODE ▲
COMMITTEE'S E-MA	IL ADDRESS (Please provide only one e-mail address)	
(Check if address is changed)	Brent.Baglien@conagrafoods.com	
COMMITTEE'S WEB	PAGE ADDRESS (URL)	
(Check if addres	. Ν/Δ	
is changed)	1	
2. DATE 0 6		
3. FEC IDENTIFICA	ATION NUMBER C C00087874	1
4. IS THIS STATEM	MENT NEW (N) OR X AMENDED (A)	
I certify that I have exam	ined this Statement and to the best of my knowledge and belief it is true, correct an	nd complete
Type or Print Name of	Treasurer Scott Messel	
. , , , , , , , , , , , , , , , , , , ,		
Signature of Treasure	Electronically Filed by Scott Messel	Date 0 6 / 1 5 / Y Y Y Y Y
NOTE: Submission of fa	alse, erroneous, or incomplete information may subject the person signing this State	
Office	For further information	contact: FEC FORM 1
Use Only	Federal Election Commis Toll Free 800-424-9530	(Revised 02/2009)